

Application Information

Application Type::	Regular
Subject Matter::	Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

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Attorney Docket Number:: PELLICER1A

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 12

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SPAIN

Status:: Full Capacity

Given Name:: Angel

Middle Name::

Family Name:: PELLICER

Name Suffix::

City of Residence:: New York
State or Province of Residence:: New York

Country of Residence:: UNITED STATES

Street of Mailing Address:: 300 East 85th Street, Apt. 1902

City of Mailing Address::

New York

State or Province of Mailing Address::

New York

Country of Mailing Address:: UNITED STATES

Postal or Zip Code of Mailing Address:: 10028
Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED STATES

Status:: Full Capacity

Given Name:: Peter

Middle Name::

Family Name:: LEONARDI

Name Suffix::

City of Residence:: East Haven
State or Province of Residence:: Connecticut

Country of Residence:: UNITED STATES

Street of Mailing Address:: 2 South Street

City of Mailing Address:: East Haven

State or Province of Mailing Address:: Connecticut

Country of Mailing Address:: UNITED STATES

Postal or Zip Code of Mailing Address:: 06512

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED STATES

Status:: Full Capacity

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Given Name:: Giorgio

Middle Name::

Family Name:: INGHIRAMI

Name Suffix::

City of Residence:: Mt. Vernon

State or Province of Residence:: New York

Country of Residence:: UNITED STATES

Street of Mailing Address:: 44 Parkway East

City of Mailing Address:: Mt. Vernon

State or Province of Mailing Address:: New York

Country of Mailing Address:: UNITED STATES

Postal or Zip Code of Mailing Address:: 10552

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application:: Continuity Type:: Parent Parent Filing

Application::

Date::

This Application Appln claiming benefit under 35 USC 119(e) 60/397,873 07/24/02

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority Claimed::

Assignment Information

Assignee Name:: New York University

Street of Mailing Address:: 70 Washington Square

City of Mailing Address::

State or Province of Mailing Address::

New York

New York

Country of Mailing Address:: United States

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Postal or Zip Code of Mailing Address:: 10012